Texas Department of Public Safety Private Security Bureau PO Box 15999, Austin, Texas 78761-5999 www.txdps.state.tx.us

REQUEST FOR RENEWAL OF OWNER/MANAGER

This form must be completed and the <u>original</u> must be returned to the Private Security Bureau along with all required fees and documents to renew an employee. **Note: Please provide a separate Owner/Manager Renewal form for each employee being renewed.**

	Owner / Manager Rene	ewai ree Schedule			
In the position of:					
in the position of		Orig. Renewal Fee:	Sub Fee:	Total Cost:	
() Owner, Officer, Partner, Sha	areholder	\$50.00		= \$55.00	
() Owner, Officer, Partner, Sha		\$50.00		= \$55.00	
() Owner, Officer, Partner, Sha		\$50.00		= \$55.00	
() Manager Only	and the second of the second o	\$30.00		= \$33.00	
() Supervisor Only		\$30.00		= \$33.00	
1	ate Fees-please check the appropr	iate response and submit l	ate fees.		
() Late Renewal Fee 0-90 l	Days	() Late	Renewal Fee	Over 90 Days	
(Orig. renewal fee + one half renewal fee) (0		(Orig. rea	rig. renewal fee + full renewal fee)		
	by mail, must also have a PSB- neck, cashier's check or money		ments receive	ed must be in the	
THE CALL STREET, TO THE	E PRIVATE SECURITY BUREA	U ARE NOT REFUNDAL	BLE OR TRAI	NSFERABLE.	
FEES SUBMITTED TO TH					
FEES SUBMITTED TO TH					
	Employee So	cial Security Number:			
Date:					
Date:			Middle		
Date: Name: Last		· · · · · · · · · · · · · · · · · · ·	Middle		
Date: Name: Last	First	· · · · · · · · · · · · · · · · · · ·	Middle		
Date: Name: Last Current mailing address of em	First nployee: Street & Number	City	Middle		
Date: Name: Last Current mailing address of em	First	City	Middle Sta		
Date: Name: Last Current mailing address of em As a "bona fide" employee of I verify that the above named	First Inployee: Street & Number Company individual is a "bona fide" en	City	Middle Sta Company L	icense Number	
Date: Name: Last Current mailing address of em As a "bona fide" employee of I verify that the above named perform the duties for which I	First Inployee: Street & Number Company individual is a "bona fide" en	City nployee of the compan	Middle Sta Company L v listed above	ite Zip icense Number e and is qualified to	

NOTICE: This is a governmental record. Any false statement made on this document could be considered a criminal violation.

PSB-18 Rev. 05/12/09

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EMPLOYEE MUST COMPLETE THE REVERSE SIDE OF THIS FORM

INVESTIGATIONS COMPANY OWNERS/OFFICERS/PARTNERS/SHAREHOLDERS, MANAGERS & SUPERVISORS ONLY:
(THIS ONLY APPLIES TO CLASS A AND C COMPANIES)
I hereby certify that I have been continuously registered with the Private Security Bureau as a private investigator or manager of a Class A or C license for more than fifteen (15) years .
I hereby certify that I have been continuously registered with the Private Security Bureau as a private investigator or manager of a Class A or C license for less than fifteen (15) years .
I
Employee signature

ALL REGISTRANTS:

Please note that your application for renewal may be denied if you are either in default on a student loan or delinquent in the payment of child support (under either Chapter 57 of the Texas Education Code or Chapter 232 of the Family Code respectively).